

## Isolation and Quarantine Timeframes for COVID-19 for Non-Healthcare Personnel

Isolation separates people with an infectious disease, like COVID-19, from people who are not sick.

## **Cases** (includes symptomatic Close Contacts)

- ✓ Must be isolated for at least 10\* days after symptoms first appeared and
- ✓ At least 24 hours since resolution of fever (without the use of fever-reducing medications) and
- ✓ Other symptoms have improved.

Symptoms may include any of the following: cough, shortness of breath, difficulty breathing, new olfactory or taste disorder, fever (measured or subjective), chills, rigors, myalgia, headache, sore throat, nausea/vomiting, diarrhea, fatigue, or congestion/runny nose.

\* Persons with severe illness may be infectious beyond the 10 days and should isolate for up to 20 days; severely immunocompromised persons may be infectious for more than 20 days and require additional testing and consultation with infectious disease specialists and infectious disease experts. A test-based strategy to discontinue isolation (2 negative PCR test results, collected more than 24 hours apart) should be considered for severely immunocompromised persons, and may be considered if someone with severe illness wishes to discontinue isolation earlier than 20 days.

Cases who never developed symptoms may discontinue isolation 10 days after the collection date of their 1st positive RT-PCR specimen for SARS-CoV-2 RNA. If re-infection is suspected, isolate if more than 3 months after 1<sup>st</sup> positive RT-PCR or symptom onset date.

Evidence does not support retesting cases within 3 months of their first positive result, if not symptomatic. https://www.cdc.gov/coronavirus/2019-ncov/hcp/duration-isolation.html

Quarantine separates non-ill persons exposed to an infectious disease to see if they may become sick.

## Close Contacts (without symptoms)

The COVID-19 incubation period and the <u>ideal length of quarantine continues to be 14 days</u> after last exposure to the case. If 14 days of quarantine is not practical, **10 days is acceptable** in order to improve compliance <u>if</u> the following conditions are met:

- ✓ Continue to monitor for symptoms daily through day 14.
- ✓ If <u>any one</u> of the following symptoms are observed, <u>isolate immediately</u> and seek testing: fever, cough, shortness of breath, difficulty breathing, fatigue, muscle or body aches, headache, new taste or smell disorder, sore throat, congestion or runny nose, nausea or vomiting, or diarrhea.
- ✓ Wear a mask, stay at least 6 feet from others, avoid crowds, wash hands frequently, and take other <u>steps to prevent the spread of COVID-19</u> in case infectious without symptoms.

## Must continue 14-day quarantine:

- Long-term care facilities, correctional facilities, and other congregate settings where safe distancing is not always
  feasible, and populations may be at increased risk disease transmission, severe complications, or death should continue
  to follow the 14-day quarantine recommendation.
- Vaccinated inpatients and residents in healthcare settings should continue to quarantine following an exposure.
- Close Contacts of persons identified as having a variant strain.

**Exceptions to quarantine** (i.e., persons who meet the following requirements do not need to quarantine):

- People who have tested positive for COVID-19 within the past 3 months and recovered do not have to quarantine as long as they do not experience symptoms.
- People who are fully vaccinated (i.e., ≥ 2 weeks after second dose in a 2-dose series, or one dose of a single-dose vaccine) <u>AND</u> have remained asymptomatic (i.e., no symptoms) since the current COVID-19 exposure NOTE: Fully vaccinated people should get tested 3-5 days after their exposure even if they don't have symptoms and wear a mask indoors in public for 14 days. If test is positive, they should isolate for 10 days post last exposure.

Healthcare Personnel (HCP), continue to refer to this guidance:

https://alabamapublichealth.gov/covid19/assets/cov-timeframes-isolation-quarantine-hcp.pdf